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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. TNCR.152.US7												
		First Named Inventor or Application Identifier Mehdi Vaez-Iravani												
		Title SAMPLE INSPECTION SYSTEM												
		Express Mail Label No. EV 321 715 947 US												
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Commissioner for Patents P. O. Box 1450, Alexandria, VA 22313-1450												
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form - <i>see page 2 of this form.</i> (Submit an original, and a duplicate for fee processing)</p> <p>2. Application:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Specification Descriptive title of the Invention, Cross References to Related Applications, Reference to Microfiche Appendix, Background of the Invention, Brief Summary of the Invention, Brief Description of the Drawings, and Detailed Description (all totaling 25 pages) <input checked="" type="checkbox"/> Claim(s) 16 pages <input checked="" type="checkbox"/> Abstract of the Disclosure 1 page <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [10 sheets informal/8 sheets formal]</p> <p>4. Oath or Declaration <input type="checkbox"/> unsigned [Total Pages 3] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 completed) c. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). </p> <p>5. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> <p>17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information and a preliminary amendment: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional of prior application No. 10/033,069 Filed on December 27, 2001, entitled: IMPROVED SAMPLE INSPECTION SYSTEM</p> <p>PRIOR APPLICATION INFORMATION: Examiner Hoa Q. Pham Group Art 2877</p> <p>18. CORRESPONDENCE ADDRESS</p> <p><input checked="" type="checkbox"/> Customer Number or Bar Code Label or <input checked="" type="checkbox"/> Correspondence address below</p> <p style="text-align: center;">36257</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Name James S. Hsue</td> <td>Reg. No. 29,545</td> </tr> <tr> <td>Attorneys for Parsons Hsue & de Runtz LLP</td> <td></td> </tr> <tr> <td>Applicant 655 Montgomery Street, Suite 1800</td> <td></td> </tr> <tr> <td>Address San Francisco</td> <td>State CA</td> </tr> <tr> <td>City United States</td> <td>Zip Code 94111</td> </tr> <tr> <td>Country: United States</td> <td>Fax (415) 693-0194</td> </tr> </table>			Name James S. Hsue	Reg. No. 29,545	Attorneys for Parsons Hsue & de Runtz LLP		Applicant 655 Montgomery Street, Suite 1800		Address San Francisco	State CA	City United States	Zip Code 94111	Country: United States	Fax (415) 693-0194
Name James S. Hsue	Reg. No. 29,545													
Attorneys for Parsons Hsue & de Runtz LLP														
Applicant 655 Montgomery Street, Suite 1800														
Address San Francisco	State CA													
City United States	Zip Code 94111													
Country: United States	Fax (415) 693-0194													

APR 02 2004

19. Fee calculations.

CLAIMS (Number Filed)	(1) FOR	(2)		(3) NUMBER EXTRA		(4) RATE		(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	11-20	=	0	x	\$18	=	\$ 0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	3-3	=	0	x	\$84	=	\$ 0.00
<input type="checkbox"/>	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.18(d))			+ \$280.00			=	
				BASIC FEE (37 CFR 1.16(a))			=	\$ 750.00
				Total of above Calculations			=	\$750.00
				Reduction by 50% for filing by small entity (Note 31 CFR 1.9, 1.27, 1.28).			=	
				TOTAL			=	\$750.00

20. FEES:

A check is enclosed for \$750.00.

The Commissioner is hereby authorized to credit overpayments or any additional fees required to Deposit Account No. 502664.

21. Other: _____

NOTE: The prior application's correspondence address will carry over to this UPA UNLESS a new correspondence address is provided below.

22. NEW CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	36257	<input checked="" type="checkbox"/> New correspondence address below			
NAME	James S. Hsue, Parsons Hsue & de Runtz LLP				
ADDRESS	655 Montgomery Street, Suite 1800				
CITY	San Francisco	STATE	California	ZIP CODE	94111
COUNTRY	U.S.A.	TELEPHONE	(415) 318-1160	FAX	(415) 693-0194

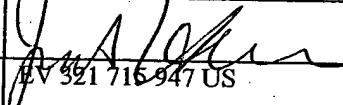
23. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Parsons Hsue & de Runtz LLP

655 Montgomery Street, Suite 1800

San Francisco, CA 94111

Tel. (415) 318-1160 Fax. (415) 693-0194

Date:	July 24, 2003	
Name	James S. Hsue	Reg. No. 29,545
Signature		
Express Mail Label No.	EV 521 716 947 US	

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Applicants: Mehdi Vaez-Iravani
KLA-Tencor Corporation
Title: Sample Inspection System
Application No.: Unassigned
Filing Date: July 24, 2003
Atty Docket No.: TNCR.152USS7

ENCLOSED:

1. This Return Receipt Postcard;
2. Utility Patent Application Transmittal (2 pages x 2);
3. Preliminary Amendment (5 pages);
4. Specification (25 pages);
5. Claims (16 pages);
6. Abstract (1 page);
7. Drawings (10 sheets informal/8 sheets formal);
8. Copy of Patent Application Declaration (from parent (3 pages);
9. Copy of U.S. Patent No. 6,169,601 (13 pages); and
10. Check in the amount of \$750.00.

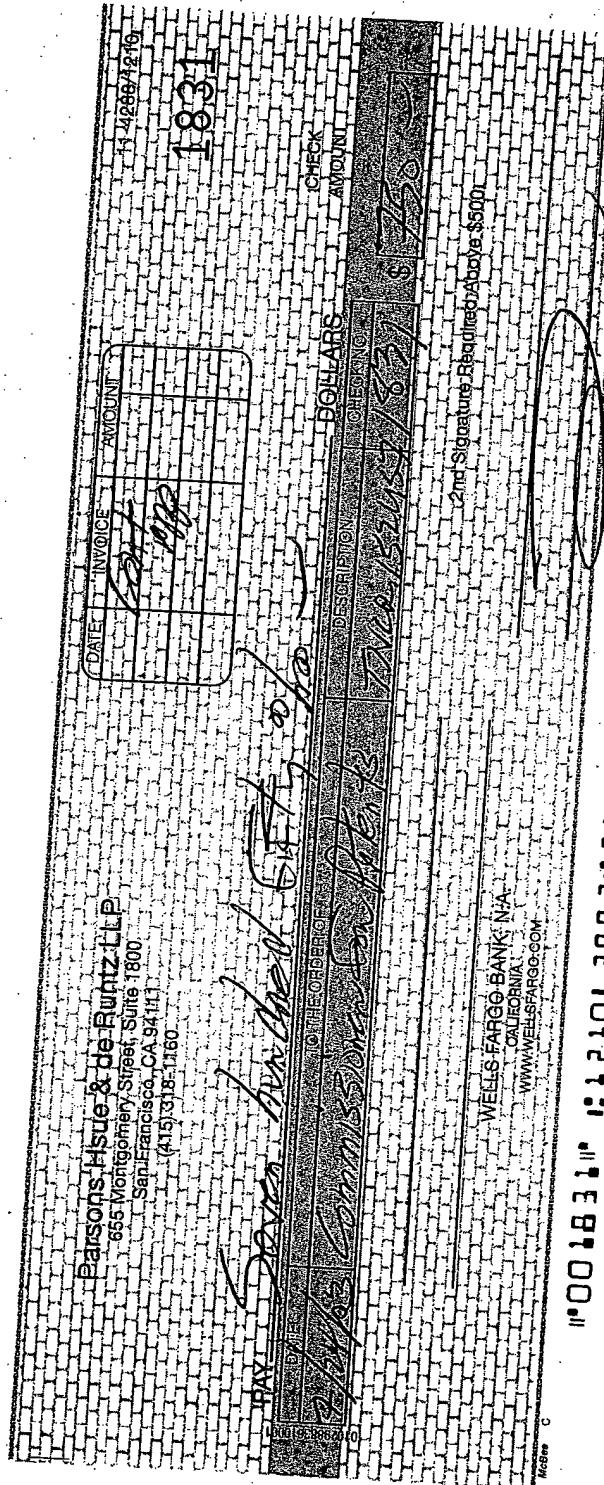
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Time in 16:50	AM PM	Delivery Date 07/24/03	Time <input type="checkbox"/> AM <input type="checkbox"/> PM
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Attachment 2



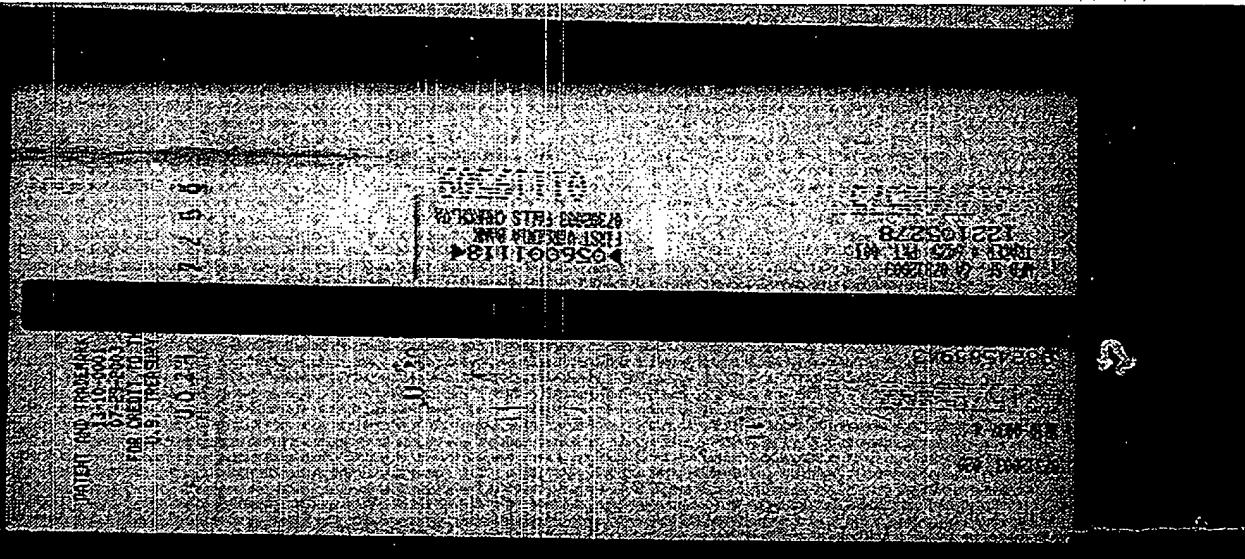
2nd Signature Required Above \$500.

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Attachment 3

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Parsons Hsue & de Runtz LLP 655 Montgomery Street, Suite 1600 San Francisco, CA 94111 (415) 378-1160		DATE / PAYMENT <i>Oct 1993</i>	AMOUNT <i>\$150</i>	11-4256/1210
PAY <i>Seven hundred Fifty \$00</i> -		DOLLARS	CHECK NO.	CHECK AMOUNT
TO THE ORDER OF <i>7/10th Commission Stks TMC 1520581831</i>		DESCRIPTION	\$ <i>150</i>	
2nd Signature Required Above \$500				
 WELLS FARGO BANK, N.A. CALIFORNIA MEMBER FDIC				
00016154 11210428621216553105*		0000075000*		



Attachment 4